The VA Network 2 Approach to Exceeding Customer Service • Issue 3, Spring 1999 http://www.visn2.med.va.gov/ http://www.va.gov/visns/visn02/

Network Benchmarking Team

by Tom Wisnieski, Canandaigua

The Network 2 Benchmarking Team was established and chartered by the VISN Customer Service Council for the express purpose of identifying and benchmarking with private healthcare organizations that are highly rated by their patients.

As you know, the VA uses a variety of standard customer service surveys to identify how our patients perceive the quality of their healthcare experience. The categories included in these surveys are access, education, coordination of care, preferences, emotional support, continuity and courtesy. Both VA and private healthcare organizations survey their patients. The Picker Institute is a national customer service research company that healthcare organizations such as the VA use to compare customer service survey results. Since healthcare organizations use the same dimensions in their survey instruments, we can make accurate comparisons about how well we are doing as compared with other healthcare organizations. Although we have made progress over the last few years, private sector healthcare organizations continue to be perceived as delivering a better healthcare experience. Our task is to identify those best practice organizations, to find out why their patients score them so highly, and to adapt and implement those identified processes that will improve the

healthcare experience for our patients. We have identified several medical centers and health maintenance organizations in the Boston area. A benchmarking team will be visiting these sites in mid-March. Look for future information on this initiative.

Just *What* is a Phantom Shopper?

by Leo Hill and Lizabeth Weiss, WNY

To be a successful organization, you have to know whom your customers are and what it is they want. The "Perceptions" Team's job is to continuously seek out this information. The task is accomplished through various means including comment cards, face to face surveys, and a "phantom shoppers program". The phantom shopper program enlists veteran users of the VAWNYHS to help identify areas within the facility that either need improvement or that are noteworthy for doing an exceptionally good job. The Phantom Shoppers have been selected to provide objective feedback during one of their regularly scheduled outpatient appointments. They report to the Perception's Captain to pick up a form on which they list their observations. These findings are reported back to

the "Perceptions" Customer Service Team. The "Perceptions" team then evaluates the phantom shopper input and develops an appropriate plan of action.

An example of the outcome of the program is the Patient Travel Lounge which is a room dedicated to the veterans waiting for transportation following their appointment. After a "shopper" identified a group of patients waiting in an out-of-the-way corridor, some not knowing why they were there, he asked why veterans are treated in such a rude manner. As a result, a room was located on the first floor for the express purpose of providing these veterans a pleasant waiting area. Veterans have the opportunity to interact with others. On occasion, they are provided refreshments and entertainment. The room décor features Armed Forces memorabilia, a fish tank, a television and a piano. It is staffed by a compensated work therapy or light duty person who provides restroom assistance and escort service. The central location allows for our contract transportation staff to pick up and drop off veterans in one location instead of having to travel through the hospital campus to deliver the patient to his appointment. We may more accurately determine when patients have been waiting a long time and intervene on their behalf. Patients who utilize the Patient Travel Lounge have expressed their appreciation for the facility, which they feel makes waiting time seem to pass more quickly.

What to E**x**pect...

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We encourage our readers to contact their facility representative related to questions, content or for article submission. The representatives are:

> Albany: Louise O'Neil Bath: James Jenkins Canandaigua: Kevin Campbell Syracuse: Carol Caldwell WNY: Lizabeth Weiss



Patient Complaints/Tracking/ Analysis Reporting

by Network 2 Patient Advocates

The Network 2 Customer Service Council has been helping to improve access and quality of care by creating systems that create improvement by listening and learning. Listening to our customers, providing employees with their feedback and exploring "why" experiences occurred as they did can guide our improvement strategies. Having the same focus, the Patient Advocates at all of the Network's medical centers receive daily input from veterans who often have much to say about how we provide patient care. The Patient Advocates record the patient's input utilizing an automated Patient Complaints/Tracking/Analysis Reporting System. The Patient Advocates are now integrating this process with the Network's Customer Service Council by compiling their results and implementing an action plan that would create a link between the automated patient complaint tracking system and the National customer service standards. Through this linkage, standards would then be established to identify areas that should be analyzed and reported network wide.

The first comprehensive report was compiled for the fourth quarter of fiscal year 1998 and submitted to the Network's Executive Leadership Council. This report included the total complaints received at each Medical Center. Each complaint received is assigned to a corresponding Customer Service Standard which includes staff courtesy, timeliness, continuity, decisions, emotional needs, coordination of care, patient education, family involvement, physical comfort and transition. The

Patient Advocates also recommended that this report include the number of unresolved issues, with each issue coded and includes the date of contact. This additional information has been added to the first quarter fiscal year 1999 report. The report will be generated by the twentieth workday after the end of each quarter.

After reviewing best practices used throughout Network 2, the Patient Advocates agreed on a consistent mechanism for correlating the complaint data and sending it to Care Line Managers at their respective facilities. This mechanism was made possible through templates that were developed by IRM staff at Albany. The Patient Advocates' plan to have the new reporting format fully implemented for the second quarter of fiscal year 1999. This report will assist staff in making improvements in each facility's delivery of customer service.

The integration of the longstanding Customer Service activities performed by the Patient Advocates is a welcome addition to the Network's Customer Service team. Their direct feedback from our patients will assist both local and Network managers. Important data will now be available in a format that enables staff to analyze and identify problems, implement actions, and make improvements specifically addressing the National Customer Service Standards. Patient Advocates participating in this project include: Joan VanRiper, Albany; Barbara Saunders, Batavia; Ruth Lysyczyn, Bath; Hank Patronski, Buffalo; Linda Krossber, Canandaigua; and Angela Kearney from Syracuse.



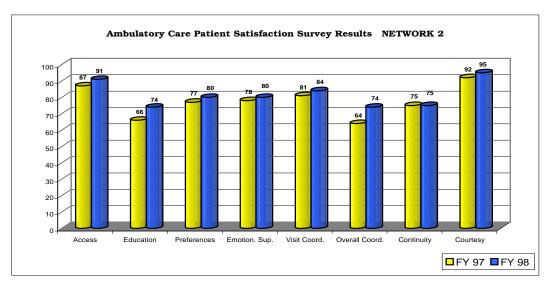
National Committee for Quality Assurance Performance Measures

by Louise O'Neil, Albany

The National Committee for Quality Assurance (NCQA) surveyed Network 2 in November 1998. NCQA is an accreditation review for managed care organizations. Its' mission is to promote improvements in the quality of patient care and provide information on quality of care to consumers. The six performance areas assessed were: Quality Improvement, Utilization Management, Credentialing, Members' Rights and Responsibilities, Preventive Health Services and Medical Records. We anticipate receiving NCQA findings during March 1999.

The Network Customer Service Council took the lead on Members' Rights and Responsibilities. This category looks at how clearly the plan informs members about how to access health services, how to choose or change physicians, and how to make a complaint or appeal a decision. It also assesses the organization's responsiveness to member satisfaction with care and services.

The preliminary strengths identified by NCQA on Members' Rights and Responsibilities include the scope and readability of patient literature, timely response to complaints and use of the Internet. The surveyors were impressed with our improvements in the VHA National Ambulatory Care Customer Satisfaction Surveys, which indicate we are listening and making appropriate changes. Specifically, the Surveys show:



Network 2 has improved in seven of the eight categories and was named as a site of excellence in two categories: Courtesy and Access. Each one of us contributes to overall patient satisfaction. We are proud of our accomplishments and are striving to achieve even higher levels of satisfaction.

A new section of the website highlights Customer Service at Network 2, including links to Customer Service Initiatives, Exceeding the Expectation, the Virtual Quickcard, and the Virtual Help Desk. This section of Vital Signs provides us with an opportunity to share information and resources related to Customer Service and is present on both the Intranet and the Internet sites. Watch for content development in this area as our Network pioneers new pathways and applications in the mission-critical Customer Service arena.

How do you get there? INTERNET: http://www.va.gov/visns/visn02/customer/service.html

INTRANET: http://vaww.visn2.med.va.gov/customer/service.html



The Rollup Report

by Lizabeth Weiss, WNY

The following report identifies our progress at the time this article went to print related to meeting the Customer Service Standards as they relate to timeliness. Beginning in March 1999, this same data will be reported for Network 2 community based outpatient clinics. This is to insure that the veteran receives the same quality of care regardless of the site in which the care is delivered. Our current focus is compliance related to the thirty-day measure. Those clinics that exceed 35 days for two consecutive months are required to submit an action plan to the Network delineating corrective action.

		Performance %		Performance %	Performance %
Network 2 Facility	Month	20 Minute Std.	20 Minute Std.	30 Day Standard	30 Day Standard
_				Primary Care Clinics	Specialty Clinics
This is the number of		Network/Sample at	Network/Sample at	Network/Sample	Network/Sample
applicable clinics (of		exceptional level	fully met level or	·	·
15 possible) at each		or meeting the std.	meeting the standard		
facility.		100% of the time	75% of the time		
		(100% performance level)	(75% performance level)		
Albany	Oct.98	1 of 12 or 8%	8 of 12 or 67%	100%	9 of 14 or 64%
	Nov.98	1 of 5 or 20%	2 of 5 or 40%	100%	10 of 12 or 83%
	Dec.98	6 of 12 or 50%	11 of 12 or 92%	100%	10 or 14 or 71%
	Jan.99	5 of 12 or 42%	10 of 12 or 83%	100%	11 of 14 or 79%
Buffalo/Batavia	Oct.98	0 of 14 or 0%	6 of 14 or 43%	100%	10 of 13 or 77%
	Nov.98	2 of 12 or 17%	5 of 12 or 42%	100%	11 of 14 or 79%
	Dec.98	1 of 14 or 7%	5 of 14 or 36%	100%	10 of 14 or 71%
	Jan.99	2 of 11 or 18%	5 of 11 or 45%	100%	13 of 14 or 93%
Syracuse	Oct.98	3 of 13 or 23%	13 of 13 or 100%	100%	9 of 14 or 64%
	Nov.98	1 of 15 or 7%	11 of 13 or 85%	100%	10 or 14 or 71%
	Dec.98	1 of 13 or 8%	9 of 13 or 69%	100%	11 of 14 or 79%
	Jan.99	0 of 10 or 0%	4 of 10 or 40%	100%	11 of 14 or 79%
Bath	Oct.98	2 of 8 or 25%	7 of 8 or 88%	100%	8 of 9 or 89%
	Nov.98	1 of 4 or 25%	4 of 4 or 100%	100%	9 of 9 or 100%
	Dec.98	3 of 8 or 38%	8 of 8 or 100%	100%	8 of 9 or 89%
	Jan.99	1 of 6 or 17%	6 of 6 or 100%	100%	9 of 9 or 100%
Canandaigua	Oct.98	0 of 12 or 0%	11 of 12 or 92%	100%	11 of 11 or 100%
	Nov.98	0 of 7 or 0%	7 of 7 or 100%	100%	6 of 6 or 100%
	Dec.98	0 of 7 or 0%	5 of 6 or 83%	100%	8 of 9 or 89%
	Jan.99	0 of 4 or 0%	2 of 4 or 50%	100%	7 of 10 or 70%

Network 2 Customer Service Standards by Carol Caldwell, Syracuse

The mission of the VA Healthcare System is to serve the needs of America's veterans. In Network 2, we are working to stay true to the mission in all aspects of service. One notable arena is Customer Service. In an effort to keep our eye on the mission and exceed the expectations of our veterans, ten standards have been identified and are actively measured. Where did these standards come from? They are a compilation of comments from veteran focus groups and a result of what veterans said they expect during the delivery of his/her health care.

Customer Service Standards

1.	Staff Courtesy	To be treated with dignity and respect.
2.	Timeliness	To be provided timely access to health care.
3.	One Provider (Continuity)	To have one identifiable health care team.
4.	Decisions	To be involved in treatment planning and have preferences met (if possible).
5.	Physical Comfort	To receive care related to such areas as pain management, eating and bathing.
6.	Emotional Needs	To be given support in dealing with condition or treatment.
7.	Coordination of Care	To have all aspects of treatment coordinated.
8.	Patient Education	To receive understandable information and education about health care.
9.	Family Involvement	To be provided opportunities for family involvement in care.
10.	Transition	To receive smooth transition between inpatient and outpatient care.

The Customer Service Team and all VA employees strive to meet these standards each and everyday. They permeate our mission, vision, performance measures and are reflected in our criteria for awards and recognition. What have you done to meet the standards in your performance today?

